

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	LME/SAY		09-05-01
O.I.P.E. CLASSIFIER			10/13
FORMALITY REVIEW	P.B	3137	10/08/01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

Claim	Date
Final Original	9/12/01
1	9/23/01
2	9/23/01
3	9/23/01
4	9/23/01
5	9/23/01
6	9/23/01
7	9/23/01
8	9/23/01
9	9/23/01
10	9/23/01
11	9/23/01
12	9/23/01
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15	9/23/01
16	9/23/01
17	9/23/01
18	9/23/01
19	N
20	N
21	N
22	N
23	N
24	✓
25	✓✓
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Claim	Date
Final Original	51
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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